

Form CPF M 102: Campaign Finance Report

Municipal Form

RECEIVED TOWN CLERK GRAFTON, MA

Office of Campaign and Political Finance

2017 MAR 29 PM 2 CO

File with: City or Town Clerk or Election Commission Fill in Reporting Period dates: Beginning Date: **Ending Date:** Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 30 day after election year-end report dissolution COOK Candidate Full Name (if applicable) Committee Name Office Sought and Distr Name of Committee Treasurer 01519 PRACTON MAL GIRAFION Committee Mailing Address Telephone Number (optional): 506 -839-6996 Telephone Number (optional): SUMMARY BALANCE INFORMATION: Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) . 22 Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) 0 Line 8: Name of bank(s) used: Upysark - germsulte Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Date: Signed under the penalties of perjury: (Treasurer's signature) FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions. incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Date: Signed under the penalties of perjury: (Candidate's signature)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

report all receipts. Please include your committee name and a page number on each page.) (A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to

Line 11: TOTAL RECEIPTS IN THE PERIOD	Line 10: Total Receipts \$50 and under* (not listed above)	Line 9: Total Receipts over \$50 (or listed above)							
them in line o	(not listed above)	ed above)							(an Landan section of any only
Enter on page 1, line 2									(

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

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to have to	F 11. TOT A	e 10: Total R									Date Received
	T 교	eceipt	eceipts								
Color of 950 and under include them in line	Line 11: TOTAL RECEIPTS IN THE PERIOD	Line 10: Total Receipts \$50 and under* (not listed above)	9: Total Receipts over \$50 (or listed above)								Name and Residential Address (alphabetical listing required)
0 1 ins 10 show			v								Amount
Id include only those receipts not itemized above											Occupation & Employer (for contributions of \$200 or more)

If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13. M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep

report all expenditures. Please include your committee name and a page number on each page.) (A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

								1/1/15-	8/14/05	Date Paid
Enter on page 1, line 4 →								UH3ANK_	Jim M'CLOSESU	To Whom Paid (alphabetical listing)
Line 14: TOTAL EXPENDITURES IN THE PERIOD	Line 13: Total Expenditures \$50 and under* (not listed	Line 12: Total Expenditures over \$50 (or listed above)						AN ASPINSMAHITY	to be earlow	Address
URES IN THE PERIOD	0 and under* (not listed above)	ver \$50 (or listed above)						SKULE	CAMPAGES	Purpose of Expenditure
180-		180-						80 . ∞	100,00	Amount

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized

SCHEDULE B: EXPENDITURES (continued)

		2							Date Paid
Enter on page 1, line $4 \rightarrow$									To Whom Paid (alphabetical listing)
Line 14: TOTAL EXPENDITURES IN THE PERIOD	Line 13: Expenditures \$50 and under* (not listed above)	Line 12: Expenditures over \$50 (or listed above)							Address
TURES IN THE PERIOD	under* (not listed above)	0 (or listed above)							Purpose of Expenditure
									Amount

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

									Date Received
Enter on page 1, line $6 \rightarrow$									From Whom Received*
Line 17: TOTAL IN-KIND CONTRIBUTIONS	Line 16: In-Kind Contributions \$50 & under (not listed above)	Line 15: In-Kind Contribution							Residential Address
ONTRIBUTIONS	\$50 & under (not listed above)	15: In-Kind Contributions over \$50 (or listed above)							Description of Contribution
									Value

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

								Date Incurred
Enter on page 1, line 7 →								To Whom Due
Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)								Address
DING LIABILITIES (ALL)								Purpose
								Amount